

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

First Named Inventor:	Christopher Pohl	
Appln. No. :		
Filing Date: :	February 18, 2004	Group Art Unit : Not Assigned
Title :	A Coated Ion Exchange Substrate And Method of Forming	Examiner : Not Assigned

**DECLARATION AND POWER OF ATTORNEY
FOR UTILITY PATENT APPLICATION
(37 C.F.R. § 1.63)**

As a below named inventor, I hereby declare that my mailing address and citizenship are as stated below.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter that is claimed and for which a patent is sought on the invention entitled:

A Coated Ion Exchange Substrate and Method of Forming

the specification of which:

☒ is attached hereto OR

☐ was forwarded to the United States Patent and Trademark Office on _____ and assigned Application Number _____.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information known to me that is material to patentability as defined in 37 C.F.R. 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

PRIOR FOREIGN APPLICATION(S)

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Claimed	Certified Copy Attached?	
				Yes	No

PRIOR PROVISIONAL APPLICATION(S)

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)

Filing Date (MM/DD/YYYY)

PRIOR U.S. APPLICATION(S)

I hereby claim the benefit under Title 35, United States Code, §120 and §119 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose to the Patent Office all information known to me to be material to patentability as defined in 37 C.F.R. 1.56 which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Application Number(s)

Filing Date (MM/DD/YYYY)

Status
(patented, pending, abandoned)

POWER OF ATTORNEY

I hereby appoint the Dorsey & Whitney LLP attorneys and agents associated with **Customer Number 32940** to prosecute the patent application identified above and to transact all business in the Patent and Trademark Office connected therewith, including full power of association, substitution, and revocation.

PLEASE DIRECT ALL CORRESPONDENCE TO:

The address associated with **Customer Number: 32940**, currently:

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. § 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Sole or First Inventor:			
Given Name (First and middle)		Family Name or Surname	
Christopher		Pohl	
Inventor's Signature	UNSIGNED		Date:
Residence			Citizenship:
	City/Providence	Country	Zip
Post Office Address			

Second Named Inventor:			
Given Name (First and middle)		Family Name or Surname	
Charanjit		Saini	
Inventor's Signature	UNSIGNED		Date:
Residence			Citizenship:
	City/Providence	Country	Zip
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